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FAX FILING IN U.S. PATENT & TRADEMARK OFFICEDATE: December 17, 2004

TIME: _____

TO:	Examiner Donnie L. Crosland	FAX NO.:	1-703-872-9306
FROM:	Christopher J. Dervishian	ADMIN. ASST.:	Patricia C. Boccella
APPLN. NO.:	10/806,371	ATTY. DOCKET NO.:	RFID-109US
TITLE OF APPLN.: COMMUNICATIONS ARCHITECTURE FOR A SECURITY NETWORK			
FILING DATE:	March 23, 2004	ART UNIT:	2636
FIRST INVENTOR:	Louis A. Stilp	CONF. NO.:	2218
TITLE OF DOCUMENT (and List of Attachments): Transmittal and Power of Attorney and Correspondence Address Indication Form			

Total Number of Pages: 3 (including this form)

COMMENTS

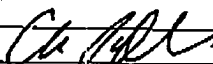
CONFIDENTIAL AND PRIVILEGED ATTORNEY/CLIENT INFORMATION

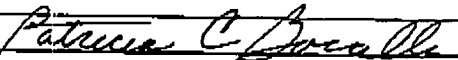
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PTO/SB/21 (04-04) (AW 06/2004)
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/808,371
	Filing Date	March 23, 2004
	First Named Inventor	Louis A. Stulp
	Art Unit	2836
	Examiner Name	Donnie L. Crestland
Total Number of Pages in This Submission 2		Attorney Docket No. RFID-109US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY OR AGENT		
Firm or Individual Name	Christopher Dervishian	Registration No. (Attorney/Agent) 42,480
Signature		
Date	December 17, 2004	

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Application Number	10/806,371
Filing Date	March 23, 2004
First Named Inventor	Louis A. Stilp
Title	COMMUNICATIONS ARCHITECTURE FOR A SECURITY NETWORK
Art Unit	2636
Examiner Name	Donnie L. Crosland
Attorney Docket Number	RFID-109US

I hereby revoke all previous powers of attorney given in the above-identified application.

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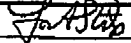
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☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature		Date	12/17/04
Name	Louis A. Stilp	Telephone	(610) 727-3930
Title and Company	CEO, Securinx, Inc.		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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